(BPD)

OMB No.: 0938-

State/Territory: Maryland

(a)

SECTION 3 - SERVICES: GENERAL PROVISIONS

Citation

3.1 Amount, Duration, and Scope of Services

42 CFR Part 440, Subpart B 1902(a), 1902(e), 1905(a), 1905(p), 1915, 1920, and 1925 of the Act

Medicaid is provided in accordance with the requirements of 42 CFR Part 440, Subpart B and sections 1902(a), 1902(e), 1905(a), 1905(p), 1915, 1920, and 1925 of the Act.

(1) Categorically needy.

> Services for the categorically needy are described below and in ATTACHMENT 3.1-A. These services include:

1902(a)(10)(A) and 1905(a) of the Act

- (1) Each item or service listed in section 1905(a)(1) through (5) and (21) of the Act, is provided as defined in 42 CFR Part 440, Subpart A, or, for EPSDT services, section 1905(r) and 42 CFR Part 441, Subpart B.
- (ii) Nurse-midwife services listed in section 1905(a)(17) of the Act, as defined in 42 CFR 440.165 are provided to the extent that nurse-midwives are authorized to practice under State law or regulation. Nurse-midwives are permitted to enter into independent provider agreements with the Medicaid agency without regard to whether the nurse-midwife is under the supervision of, or associated with, a physician or other health care provider.
- Not applicable. Nurse-midwives are not authorized to practice in this State.

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Citation

3.1(a)(1) Amount, Duration, and Scope of Services: Categorically Needy (Continued)

1902(e)(5) of the Act

- Pregnancy-related, including family planning services, and postpartum services for a 60-day period (beginning on the day pregnancy ends) and any remaining days in the month in which the 60th day falls are provided to women who, while pregnant, were eligible for, applied for, and received medical assistance on the day the pregnancy ends.
- (iv) Services for medical conditions that may complicate the pregnancy (other than pregnancy-related or postpartum services) are provided to pregnant women.

1902(a)(10), clause (VII) of the matter following (E) of the Act

(v) Services related to pregnancy (including prenatal, delivery, postpartum, and family planning services) and to other conditions that may complicate pregnancy are the same services provided to poverty level pregnant women eligible under the provision of sections $1902(a)(10)(\lambda)(1)(IV)$ and 1902(a)(10)(A)(11)(IX) of the Act.

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3.1(a)(1) Amount, Duration, and Scope of Services: Categorically Needy (Continued)

- (vi) Home health services are provided to individuals entitled to nursing facility services as indicated in item 3.1(b) of this plan.
- 1902(e)(7) of the Act
- (vii) Inpatient services that are being furnished to infants and children described in section 1902(1)(1)(B) through (D), or section 1905(n)(2) of the Act on the date the infant or child attains the maximum age for coverage under the approved State plan will continue until the end of the stay for which the inpatient services are furnished.
- // (viii)Respiratory care services are provided 1902(e)(9) of the to ventilator dependent individuals as Act indicated in item 3.1(h) of this plan.
- 1902(a)(52) and 1925 of the Act
- (ix) Services are provided to families eligible under section 1925 of the Act as indicated in item 3.5 of this plan.

ATTACHMENT 3.1-A identifies the medical and remedial services provided to the categorically needy, specifies all limitations on the amount, duration and scope of those services, and lists the additional coverage (that is in excess of established service limits) for pregnancy-related services and services for conditions that may complicate the pregnancy.

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citation

Amount, Duration, and Scope of Services (continued) 3.1

42 CFR Part 440,

Medically needy. (a)(2)

Subpart B

17 This State plan covers the medically needy. The services described below and in ATTACHMENT 3.1-B are provided.

Services for the medically needy include:

1902(a)(10)(C)(iv) of the Act 42 CFR 440,220

If services in an institution for mental diseases (42 CFR (i) 440.140 and 440.160) or an intermediate care facility for the mentally retarded (or both) are provided to any medically needy group, then each medically needy group is provided either the services listed in section 1905(a)(1) through (5) and (17) of the Act, or seven of the services listed in section 1905(a)(1) through (20). The services are provided as defined in 42 CFR Part 440, Subpart A and in sections 1902, 1905, and 1915 of the Act.

> Not applicable with respect to nurse-midwife services under section 1902(a)(17). Nurse-midwives are not authorized to practice in this State.

1902(e)(5) of the Act

(ii) Prenatal care and delivery services for pregnant women.

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3.1(a)(2) Amount, Duration, and Scope of Services:

Medically Needy (Continued)

- (iii) Pregnancy-related, including family planning services, and postpartum services for a 60-day period (beginning on the day the pregnancy ends) and any remaining days in the month in which the 60th day falls are provided to women who, while pregnant, were eligible for, applied for, and received medical assistance on the day the pregnancy ends.
- /X/(iv) Services for any other medical condition that may complicate the pregnancy (other than pregnancy-related and postpartum services) are provided to pregnant women.
 - (v) Ambulatory services, as defined in <u>ATTACHMENT</u> 3.1-B, for recipients under age 18 and recipients entitled to institutional services.
 - Not applicable with respect to recipients entitled to institutional services; the plan does not cover those services for the medically needy.
 - (vi) Home health services to recipients entitled to nursing facility services as indicated in item 3.1(b) of this plan.

42 CFR 440.140, 440.150, 440.160 Subpart B, 442.441, Subpart C

and (21) of the Act //

1902(a)(20)

 $\sqrt{X}/(\text{vii})$ Services in an institution for mental diseases for individuals over age 65..

/X/(viii)Services in an intermediate care facility for the mentally retarded.

(ix) Inpatient psychiatric services for individuals under age 21.

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3.1(a)(2)

Amount, Duration, and Scope of Services: Medically Needy (Continued)

1902(e)(9) of the Act

Respiratory care services are provided \angle / (ix) to ventilator dependent individuals as indicated in item 3.1(h) of this plan.

> ATTACHMENT 3.1-B identifies the services provided to each covered group of the medically needy; specifies all limitations on the amount, duration, and scope of those items; and specifies the and scope of those items; and specifies the ambulatory services provided under this plan and any limitations on them. It also lists the additional coverage (that is in excess of established services limits) for pregnancy-related services and services for conditions that may complicate the pregnancy.

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21 (CMSO) HCFA-PM-97-3 Revision: December 1997 State: Maryland Citation 3.1 Amount, Duration, and Scope of Services (continued) Other Required Special Groups: Qualified (a)(3)Medicare Beneficiaries 1902 (a) (10) (E) (I) Medicare cost sharing for qualified and clause (VIII) Medicare beneficiaries described in section 1905 (p) of the act is provided if the matter following (F). only as indicated in item 3.2 of this and 1905 (p) (3) plan. of the Act 1902 (a) (10) (a) (4) (I)Other Required Special Groups: Qualified Disabled and Working Individuals (E) (ii) and 1905 (s) of the Medicare Part A premiums for qualified Act disabled and working individuals described in section 1902 (a) (10) (E) (ii) of the Act are provided as indicated in item 3.2 of this plan. 1902 (a) (10) (ii) Other Required Special Groups: Specified Low-Income Medicare Beneficiaries (E) (iii) and 1905 (p) (3) (A) (ii) of the Act Medicare Part B premiums for specified low-income Medicare beneficiaries described in section 1902 (a) (10) (E) (iii) of the Act are provided as indicated in item 3.2 of this plan. 1902 (a) (10) Other Required Special Groups: Qualifying (iii) Individuals (E) (iv) (I) and 1905 (p) (3) (A) (ii). and 1933 of the Act Medicare Part B premiums for qualifying individuals described in 1902 (a) (10) (E) (iv) (I) and subject to 1933 of the Act are

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provided as indicated in item 3.2 of this plan.

Revision:

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(CMSO)

December 1997

State:

Maryland

1902 (a) (10)

(E) (iv) (II). 1905 (p) (3) (A) (iv) (H), 1905 (p) (3)

the Act

Other Required Special Groups: Qualifying (iv)

Individuals - 2

The portion of the amount of increase to the Medicare Part B premium attributable to the Home Health provisions for qualifying individuals described in 1902 (A) (10) (E) (iv) (II) and subject to 1933 of the Act are provided as indicated in item 3.2 of this plan.

1925 of the Act

(a)(5)

Other Required Special Groups: Families Receiving Extended Medicaid Benefits

Extended Medicaid benefits for families described in section 1925 of the Act are provided as indicated in item 3.5 of this plan.

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Citation

3.1(a)(6)

Amount, Duration, and Scope of Services: Limited Coverage for Certain Aliens (continued)

1902(a) and 1903(v) of the Act

(iii) Aliens who are not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law who meet the eligibility conditions under this plan, except for the requirement for receipt of AFDC, SSI, or a State supplementary payment, are provided Medicaid only for care and services necessary for the treatment of an emergency medical condition (including emergency labor and delivery) as defined in section 1903(v)(3) of the Act.

1905(a)(9) of the Act

(a)(7) Homeless Individuals.

Clinic services furnished to eligible individuals who do not reside in a permanent dwelling or do not have a fixed home or mailing address are provided without restrictions regarding the site at which the services are furnished.

Presumptively Eligible Pregnant Women

1902(a)(47) and 1920 of the Act

(a)(8) Ambulatory prenatal care for pregnant women is provided during a presumptive eligibility period if the care is furnished by a provider that is eligible for payment under the State plan.

42 CFR 441.55 50 FR 43654 1902(a)(43), 1905(a)(4)(P) and 1905(r) of the Act

(a)(9) EPSDT Services.

The Medicaid agency meets the requirements of sections 1902(a)(43), 1905(a)(4)(B), and 1905(r) of the Act with respect to early and periodic screening, diagnostic, and treatment (EPSDT) services.

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Amount, Duration, and Scope of Services: EPSDT 3.1(a)(9)

Services (continued)

42 CFR 441.60

The Medicaid agency has in effect agreements with continuing care providers. Described below are the methods employed to assure the providers' compliance with their agreements.

42 CFR 440.240 and 440.250

(a)(10) Comparability of Services

Except for those items or services for which sections 1902(a), 1902(a)(10), 1903(v), 1915 and 1925 of the Act, 42 CFR 440.250, and section 245A of the Immigration and Nationality Act, permit exceptions:

1902(a) and 1902 (a)(10), 1902(a)(52), 1903(v), 1915(g), and 1925(b)(4) of the Act

- (i) Services made available to the categorically needy are equal in amount, duration, and scope for each categorically needy person.
- (ii) The amount, duration, and scope of services made available to the categorically needy are equal to or greater than those made available to the medically needy.
- (iii) Services made available to the medically needy are equal in amount, duration, and scope for each person in a medically needy coverage group.
- 17 (iv) Additional coverage for pregnancy-related services and services for conditions that may complicate the pregnancy are equal for categorically and medically needy.

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